

2011 JAN 26 AM 11:39



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Long Thomas D.  
CITY CLERK'S OFFICE

1. Office, Agency, or Court

Agency Name

City of Rancho Palos Verdes

Division, Board, Department, District, if applicable

Your Position

City Council/Redevelopment Agency/Improv. Authority

City Council Member/RDA and IA Member

► If filing for multiple positions, list below or on an attachment.

Agency: See attached Exhibit A

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☒ City of Rancho Palos Verdes

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_\_

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed

8 January 2011  
(month, day, year)

Signature

**Exhibit A**

2011 STATEMENT OF ECONOMIC INTERESTS – FORM 700

COVER PAGE ATTACHMENT FOR EXPANDED STATEMENT

**Thomas D. Long**

Agency:

Sanitation Districts (District No. 5 & South Bay Sanitation District)

Position title: Board Member (Annual)

W:\CONFLICT OF INTEREST\2011\Expanded Stmt for Council\Long expanded statement - internal only.doc

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PRACTICES COMMISSION

2011 JAN 26

## SCHEDULE A-1

### Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Thomas D. Long

<p>▶ NAME OF BUSINESS ENTITY <b>Abbott Laboratories (ABT)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Pharmaceuticals</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Apple (AAPL)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Technology</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Berkshire Hathaway (BRK.B)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Conglomerate</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>BP (BP)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Oil &amp; Gas</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: 6/9/10      ____/____/10 ACQUIRED      DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Chubb Ins. Co. (CB)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Insurance</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: 5/13/10      ____/____/10 ACQUIRED      DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Coach (COH)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Purses</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499                                  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/10      ____/____/10 ACQUIRED      DISPOSED</p>

Comments:

3

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## SCHEDULE A-1

### Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Thomas D. Long

<p>▶ NAME OF BUSINESS ENTITY <b>Emerson Electric (EMR)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Electrical Utility</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: _____/_____/10    ____/_____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>General Electric (GE)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Conglomerate</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: 12/13/10    ____/_____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>General Mills (GIS)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Food</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: _____/_____/10    ____/_____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Goldman Sachs (GS)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Financial</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: 5/27/10    ____/_____/10 ACQUIRED                  DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <b>Heinz (HNZ)</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Food</b></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input checked="" type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: _____/_____/10    ____/_____/10 ACQUIRED                  DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <b>Honeywell</b></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <b>Technology</b></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                           <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: _____/_____/10    ____/_____/10 ACQUIRED                  DISPOSED</p>

Comments:

4

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**SCHEDULE A-1**  
**Investments**

2011 JAN 26 5 11 PM  
**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
Thomas D. Long

▶ **NAME OF BUSINESS ENTITY**  
Hormel (HRL)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Food  
**FAIR MARKET VALUE**  
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
       /        / 10        /        / 10  
ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Johnson & Johnson (JNJ)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Household Products  
**FAIR MARKET VALUE**  
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
       /        / 10        /        / 10  
ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Lorillard (LO)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Tobacco  
**FAIR MARKET VALUE**  
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
6 / 10 / 10        /        / 10  
ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Protective Life Ins. Co. (PL)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Insurance  
**FAIR MARKET VALUE**  
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
5 / 27 / 10        /        / 10  
ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Royal Dutch Shell (RDS.A)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Oil & Gas  
**FAIR MARKET VALUE**  
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
       /        / 10        /        / 10  
ACQUIRED DISPOSED

▶ **NAME OF BUSINESS ENTITY**  
Talisman Energy (TLM)  
**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
Oil & Gas  
**FAIR MARKET VALUE**  
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000  
**NATURE OF INVESTMENT**  
☒ Stock ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)  
**IF APPLICABLE, LIST DATE:**  
       /        / 10        /        / 10  
ACQUIRED DISPOSED

Comments: \_\_\_\_\_

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**SCHEDULE A-1**  
**Investments**

2011 ~~Stocks, Bonds~~ and Other Interests  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
Name  
Thomas D. Long

<p>▶ NAME OF BUSINESS ENTITY <u>Teva Pharmaceuticals (TEVA)</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Pharmaceuticals</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>9 / 16 / 10</u>      <u>     /     / 10</u>            ACQUIRED      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>Western Digital Corporation</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Computers</u></p> <p>FAIR MARKET VALUE  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>12 / 13 / 10</u>      <u>     /     / 10</u>            ACQUIRED      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>YUM! Brands</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Fast Food</u></p> <p>FAIR MARKET VALUE  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>     /     / 10</u>      <u>     /     / 10</u>            ACQUIRED      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>Mattel (MAT)</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Toys, Games</u></p> <p>FAIR MARKET VALUE  <input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>5 / 13 / 10</u>      <u>9 / 13 / 10</u>            ACQUIRED      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>Nossaman LLP</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Law</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input checked="" type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input checked="" type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>     /     / 10</u>      <u>     /     / 10</u>            ACQUIRED      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY <u>      </u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>      </u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)  <input type="checkbox"/> Partnership      <input type="checkbox"/> Income Received of \$0 - \$499  <input type="checkbox"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>     /     / 10</u>      <u>     /     / 10</u>            ACQUIRED      DISPOSED         </p>

Comments: \_\_\_\_\_

6

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
**Thomas D. Long**

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

**Nossaman LLP**

ADDRESS (Business Address Acceptable)

**445 South Figueroa Street 31st Floor LA, CA 90071**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Law**

YOUR BUSINESS POSITION

**Partner**

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☒ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary      ☐ Spouse's or registered domestic partner's income  
☐ Loan repayment      ☐ Partnership  
☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☒ Other **Share of partnership profits in practice of law.**  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☒ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary      ☐ Spouse's or registered domestic partner's income  
☐ Loan repayment      ☐ Partnership  
☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)  
☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

INTEREST RATE

TERM (Months/Years)

ADDRESS (Business Address Acceptable)

\_\_\_\_\_%      ☐ None

BUSINESS ACTIVITY, IF ANY, OF LENDER

SECURITY FOR LOAN

☐ None      ☐ Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

☐ Real Property \_\_\_\_\_  
Street address

\_\_\_\_\_  
City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

RECEIVED  
FAIR POLITICAL  
PRACTICES COMMISSION

2011 JAN 26 **SCHEDULE D**  
**Income - Gifts**

CALIFORNIA FORM **700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Thomas D. Long

► NAME OF SOURCE

Narver Associates

ADDRESS (Business Address Acceptable)

641 W. Las Tunas Drive San Gabriel, CA 91776

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance brokerage

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

6 / 28 / 10 \$ 250 meals

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

► NAME OF SOURCE

Miller Insurance

ADDRESS (Business Address Acceptable)

Dawson Hs., 5 Jewry St. London EC3N 2PJ England

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance brokerage

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

6 / 29 / 10 \$ 250 meals

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)

~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~  
~~\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ \$ \_\_\_\_\_~~

Comments: Gifts listed are estimated value of meals provided by insurance brokers on my annual trip to London to buy professional liability insurance for my firm, Nossaman LLP.